24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)	FOR SE OF FORM 24/48
IAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Protect Our Future PAC	
	C C00801514
check if X 24-hour report 48-hour report New report Amends report filed	I on Mam / Dad / Yayayay
Full Name of Payee	Date of Public Distribution/Dissemination
Adbeat Strategies	M - M / D - D / Y - Y - Y
Mailing Address 4601 Fairfax Dr	04 19 2022
Ste 1200	Amount
City State Zip Code	89000.00
Arlington VA 22203-1559	Transaction ID: 500090632 Date of Disbursement or Obligation
Purpose of Expenditure Ad Buy - Digital Category/ Type	04
Name of Federal Candidate Support Office	e Sought: X House District: 04
FOUSHEE, VALERIE, , ,	President Senate State: NC
Calendar Year-To-Date Per Election for Office Sought Disbut 2022	ursement For: Primary General Other (specify) ▶
Full Name of Payee PFB Media	Date of Public Distribution/Dissemination
Mailing Address 505 Court St	04 19 2022
Unit 1H	Amount
City State Zip Code	21274.41
Brooklyn NY 11231-3947	Transaction ID : 500090598
Purpose of Expenditure Ad Production Category/	Date of Disbursement or Obligation
Ad Production Type	04 20 2022
Name of Federal Candidate Support Offic	e Sought: X House District: 04
FOUSHEE, VALERIE, , , Oppose	President Senate State: NC
Calendar Year-To-Date Per Election for Office Sought Disb 2022	ursement For: Primary General Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	110274.41
(b) SUBTOTAL of Unitemized Independent Expenditures	1 1 7 1 1 7 1 1 7 1
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not mwith, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
2 4.10	04 20 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 2 OF 2 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Protect Our Future PAC	C C00801514
Check if X 24-hour report 48-hour report New report Amends report filed on	
Full Name of Payee Targeted Platform Media	Date of Public Distribution/Dissemination
Mailing Address PO Box 237	04 / 19 / 2022
	Amount
City State Zip Code	661000.00
	Transaction ID : 500090631 Date of Disbursement or Obligation
Purpose of Expenditure Ad Buy - TV Category/ Type	04 / 14 / 2022
Name of Federal Candidate Support Office S	ought: X House District: 04
FOLISHEE VALERIE	resident Senate State: NC
Calendar Year-To-Date Per Election for Office Sought Disburse 2022	ement For: ✓ Primary General Other (specify) ✓
Full Name of Payee	Date of Public Distribution/Dissemination
Mailing Address	Amount
	Amount
City State Zip Code	
Purpose of Expenditure Category/ Type	Date of Disbursement or Obligation
Name of Federal Candidate Support Office S	Sought: House District:
Oppose P	resident Senate State:
Calendar Year-To-Date Per Election for Office Sought	ement For: Primary General Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	661000.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	771274.41
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
Montoya, Dacey, , , [Electronically Filed] Date 04	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Oignaturo ————————————————————————————————————	